



Response Under 37 C.F.R. §1.116
Expedited Procedure Examining
Examining Group 2812

PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Chung H. Lam

Examiner: Ron E. Pompey

Serial No: 10/029,512

Art Unit: 2812

Filed: December 21, 2001

Docket: BUR919990120US2 (13344A)

For: PROCESS USING POLY-BUFFERED STI **Dated:** July 10, 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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RESPONSE UNDER 37 C.F.R. 1.116

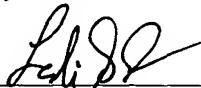
Sir:

In response to the Final Rejection dated April 10, 2003, applicants submit the following amendments and remarks for entry of record in the above-identified patent application.

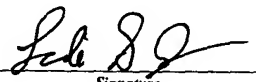
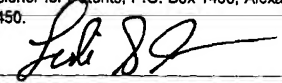
CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 10, 2003.

Dated: July 10, 2003


Leslie S. Szivos

AF/2800

AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. BUR919990120US2 (13344A)		
Applicant(s): Chung H. Lam					
Serial No. 10/029,512 ✓	Filing Date December 21, 2001	Examiner Ron E. Pompay	Group Art Unit 2812		
Invention: PROCESS USING POLY-BUFFERED STI					
<u>TO THE COMMISSIONER FOR PATENTS</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	6 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	4 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0456/IBM <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="writing-mode: vertical-rl; transform: rotate(180deg); text-align: center;">RECEIVED JUL 16 2003 TECHNOLOGY CENTER 2800</div></div> <div style="margin-top: 20px;"><div style="display: flex; align-items: center;"><div style="text-align: center;"> _____ Signature</div><div style="margin-left: 20px;">Dated: July 10, 2003</div></div><div style="margin-top: 20px;"><div>Leslie S. Szivos Registration No.: 39,394</div><div>SCULLY, SCOTT, MURPHY & PRESSER 400 Garden City Plaza Garden City, New York 11530 (516) 742-4343</div><div>cc: LSS:HAH:jy</div></div></div>					
<div style="border: 1px solid black; padding: 5px;"><div>I certify that this document and fee is being deposited on July 10, 2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="text-align: center;"> _____ Signature</div><div style="text-align: center;">Leslie S. Szivos Typed or Printed Name</div></div>					